

PCMH Quality Metrics Subcommittee Meeting
June 12, 2014

Attendees

Dr. Pat Morrow, Blue Cross Blue Shield of Montana

Dr. Jonathan Griffin, Chair, St. Peter's Hospital

Paula Block, Montana Primary Care Association

Todd Harwell, Public Health and Safety Division, Department of Public Health & Human Services

Dr. Steve Helgersen, Public Health and Safety Division, Department of Public Health & Human Services

Dr. Thomas H. Roberts, Montana Health Co-op

Jody Haines, Providence Health System

Dr. Rob Stenger, St. Patrick's Hospital Grant Creek Family Practice

Kelly Gallipeau, Kalispell Regional Medical Center

Dr. Janice Gomersall, Community Physicians Group, Mountain View Family Medicine and Obstetrics

CSI Staff

Christina Goe

Amanda Eby

After much discussion on possible strategies to adjust the measures and their reporting parameters to make them less burdensome on practices, CSI proposed making the following changes to the rule and guidance:

- Practices can choose at least three of the four measures to report data on to the commissioner.
- Data will only be used in aggregate without ever specifically naming patients or practices in reports to the legislature or others.
- The measures align exactly with PQRS, except that immunization reporting includes all 2-year-olds up to the age of 3.
- Pediatric practices need only report on one quality measure, immunizations.
- Practices that report on ADULTS ONLY, would not include immunizations, but those that report adults and children (Family Practice), could choose to report on immunizations.
- Payers who participate in the PCMH program will have to align with these four measures at a minimum, if their payment model includes quality measure based incentives.
- Data on the measures may not necessarily be used in the March 2015 report.

The attendees agreed unanimously with the proposed approach. Providers commented that they felt better about alignment and flexibility that recognizes that PCMH is a journey for practices.